

Commonwealth of Kentucky Personnel Cabinet

Prepared for:
Kentucky Group Health Insurance Board Members

April 2007

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Dashboard Report: Based on Incurred Claims. Includes projections for Incurred but not yet reported claims (IBNR or CMPL)

1. Enrollment

Fact	Dec 2005 - Nov 2006	Dec 2004 - Nov 2005	% Change
Employees Avg Med	146,791	143,836	2.10%
Members Avg Med	235,220	229,482	2.50%
Family Size Avg	1.6	1.6	0.40%
Member Age Avg	37.0	37.1	-0.40%

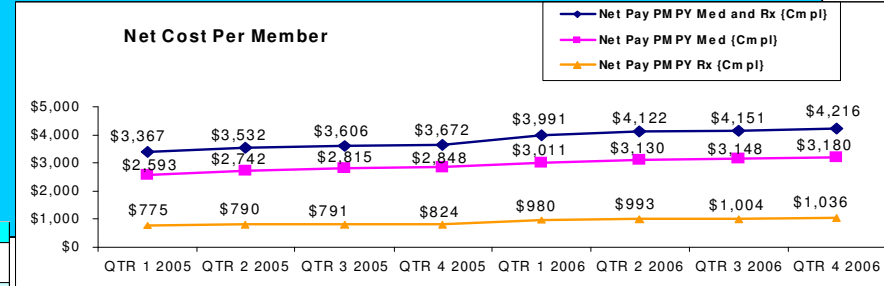
3. Allowed Claims Costs PMPY with Norms

	Dec 2004 - Nov 2005	Dec 2005 - Nov 2006	Trend	Recent US Norm	Comp to Norm
Allow Amt PMPY Med {Cmpl}	\$3,112.42	\$3,488.08	12%	\$3,423.27	1.86%
Allow Amt PMPY IP Acute {Cmpl}	\$914.24	\$999.39	9%	N/A	N/A
Allow Amt PMPY OP Med {Cmpl}	\$2,177.14	\$2,473.83	14%	\$2,304.66	6.84%
Allow Amt PMPY OP Fac Med {Cmpl}	\$1,004.69	\$1,015.89	1%	N/A	N/A
Allow Amt PMPY Office Med {Cmpl}	\$773.56	\$879.75	14%	\$0.00	N/A
Allow Amt PMPY OP Lab {Cmpl}	\$135.90	\$209.54	54%	\$0.00	N/A
Allow Amt PMPY OP Rad {Cmpl}	\$288.69	\$425.63	47%	\$0.00	N/A
Out of Pocket PMPY Med {Cmpl}	\$293.00	\$321.91	10%	\$597.02	-85.46%
Allow Amt PMPY Rx {Cmpl}	\$1,080.42	\$1,191.32	10%	\$941.04	21.01%
Out of Pocket PMPY Rx {Cmpl}	\$274.83	\$216.56	-21%	\$0.00	N/A

6.b. Cost Driver Support Table

Fact	Dec 2004 - Nov 2005	Dec 2005 - Nov 2006	% Change
Allow Amt Per Day Adm Acute	\$2,840.77	\$2,853.87	0.46%
Days Per 1000 Adm Acute	317.72	340.70	7.23%
Allow Amt Per Visit OP Fac Med	\$672.16	\$630.42	-6.21%
Visits Per 1000 OP Fac Med	1,494.72	1,811.45	7.81%
Allow Amt Per Visit Office Med	\$103.23	\$108.24	4.85%
Visits Per 1000 Office Med	7,493.52	8,128.08	8.47%
Allow Amt Per Day Supply Rx	\$2.17	\$2.22	2.30%
Days Supply PMPY Rx	498.95	537.79	7.78%

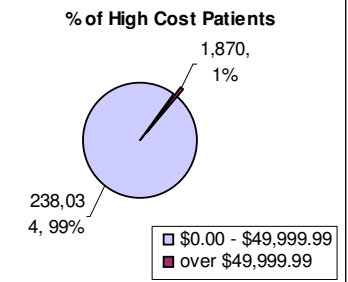
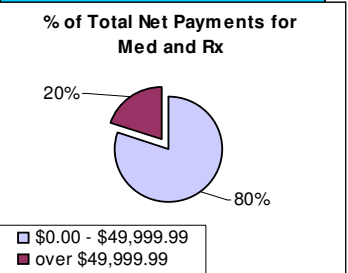
2. Net Claims Costs PMPY - (PMPY Costs as calculated at the end of each Quarter)



5. Prescription Drug Programs

	Fact	Dec 2004 - Nov 2005	Dec 2005 - Nov 2006	% Change
Mail Order	Discount Off AWP % Rx	26.06%	32.39%	24.32%
	Scripts Generic Efficiency Rx	85.86%	90.75%	5.69%
Retail	Discount Off AWP % Rx	26.76%	32.56%	21.68%
	Scripts Generic Efficiency Rx	91.38%	93.92%	2.78%
Total	Discount Off AWP % Rx	26.67%	32.54%	21.99%
	Scripts Generic Efficiency Rx	91.19%	93.79%	2.86%
	Scripts Maint Rx % Mail Order	5.47%	6.41%	17.20%

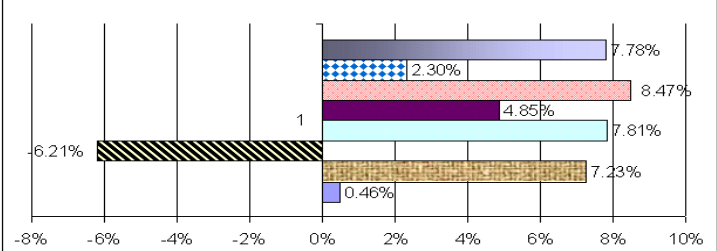
4. High cost Claimants: Dec 2005 - Nov 2006



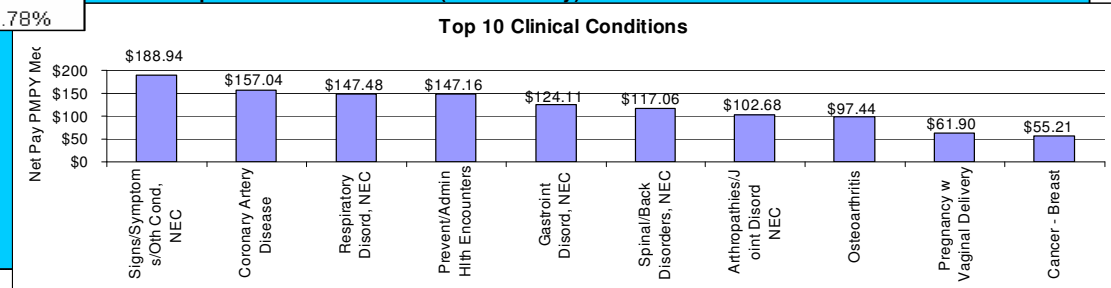
6. Cost Drivers

Days Supply PMPY Rx	7.78%
Allow Amt Per Day Supply Rx	0.46%
Visits Per 1000 Office Med	8.47%
Allow Amt Per Visit Office Med	4.85%
Visits Per 1000 OP Fac Med	7.81%
Allow Amt Per Visit OP Fac Med	6.21%
Days Per 1000 Adm Acute	7.23%
Allow Amt Per Day Adm Acute	2.30%

Utilization and Price Trends



7. Top 10 Clinical Conditions (Medical Only): December 2005 to November 2006



Introduction

The Department for Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees Health Plan. In response to requests for data analysis this report has been prepared to provide information related to enrollment, claims payment, and utilization.

It is the Department's intent to update this information on a monthly basis in an effort to continue to provide current information about Kentucky's Health Insurance Program.

Overview

This report is compiled using Medstat, which is DEI's health insurance information management system. Medstat warehouses enrollment and claims data. Enrollment data is provided by DEI while claims data is provided by each carrier and/or TPA.

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding dependents, dropping dependents, marriage, divorce, becoming Medicare eligible, etc. Therefore, Medstat is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2005 Medstat processed enrollment information for a total of 253,984 members as well as 7,196,140 claims (3,083,368 Medical claims and 4,048,855 prescriptions) from five different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Medstat.

Definitions

DEI utilized the following definitions in preparing reports:

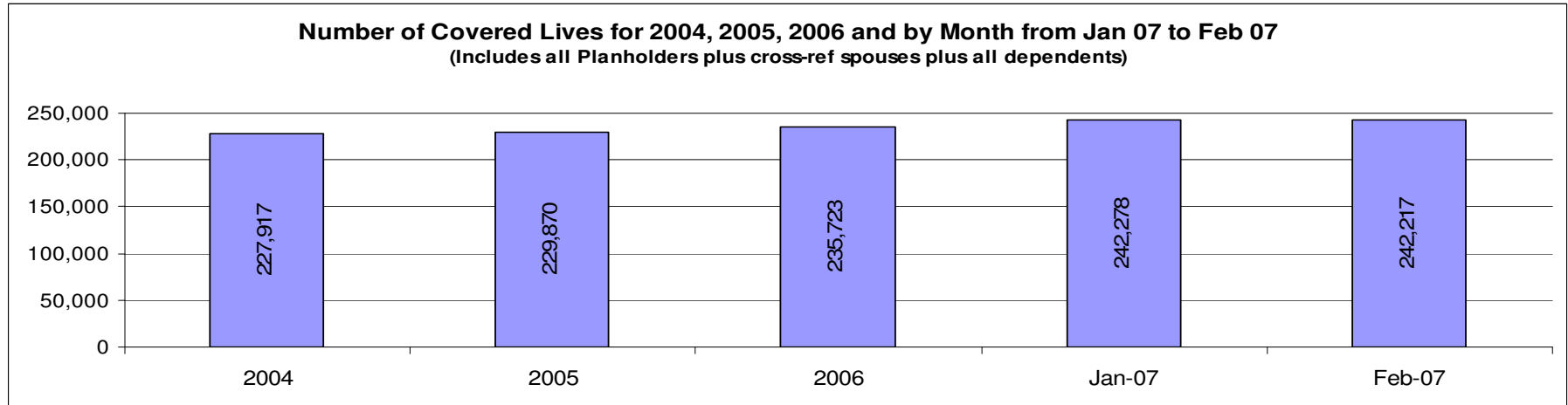
- “Employee” represents an individual eligible to participate in KEHP as a retiree in either KTRS or KRS, or by being employed by one of the agencies that participate with KEHP (example: state employee, school boards, Quasi agency, etc.). Employee may also be referred to as “planholder” or “contracts”. Please note that Medstat deals with Cross-reference plans uniquely. Although there are in fact two “employees” Medstat can only designate the planholder as an employee. Therefore, the cross-referenced spouse is considered a dependent and all claims and utilization data related to them is counted as a “member”.
- “Member” includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as “covered lives”.
- “Group” is Kentucky Retirement System (KRS), Kentucky Teachers Retirement System (KTRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, Quasi/Local Governments).
- “Plan” is Commonwealth Essential, Commonwealth Enhanced, Commonwealth Premier, HMO Option A, HMO Option B, POS Option A, POS Option B, PPO Option A, PPO Option B, or EPO Option C.
- “Carrier” may be Aetna, Anthem, Bluegrass Family Health, CHA Health, United Healthcare, or Humana (please note that Express Scripts data is designated as Humana).
- “Generic Efficiency” means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- “OOP” is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- “Allowed Amount” is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.
- “Net Payment” is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- “Patients” is the unique count of members who received facility, professional, or pharmacy services.
- “Days Supply” is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- “Mail Order” is computed as any script filled with a “days supply” of more than 30 days, regardless of the physical location where the prescription was filled.
- “Retail” is computed as any script filled with a “days supply” of 30 days or less, regardless of the physical location where the prescription was filled.

Enrollment

The following details planholder enrollment (contracts) for 2004, 2005, 2006 and monthly year-to-date for 2007. Enrollment will fluctuate on a monthly basis. (Note: There have been approximately 7,000 cross-referenced spouses in any given month that are not included in the following chart.)



The following details member enrollment (covered lives) for 2004, 2005, 2006 and monthly year-to-date for 2007. Enrollment will fluctuate on a monthly basis.

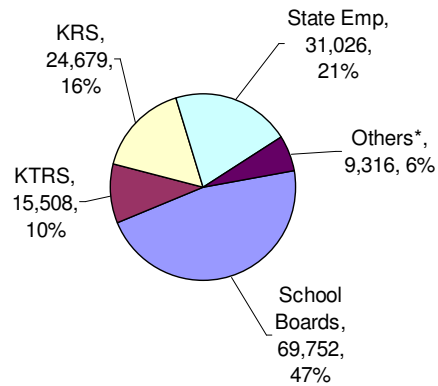


The following shows the number of cross-reference spouses for 2004, 2005, 2006 and monthly year-to-date for 2007. Number of Cross-Reference Spouses will fluctuate on a monthly basis.

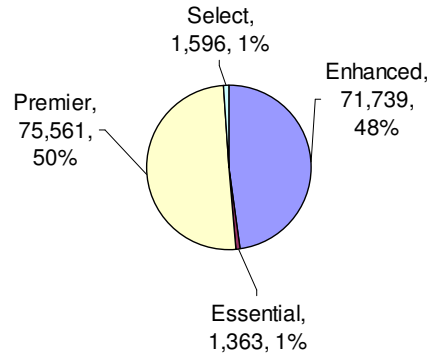
Time Period	Number of Cross-Reference Spouses
Avg - 2004	5,004
Avg - 2005	7,020
Avg - 2006	7,123
Jan-07	7,210
Feb-07	7,215

The following displays Planholder and Member enrollment by group, plan, and coverage level.

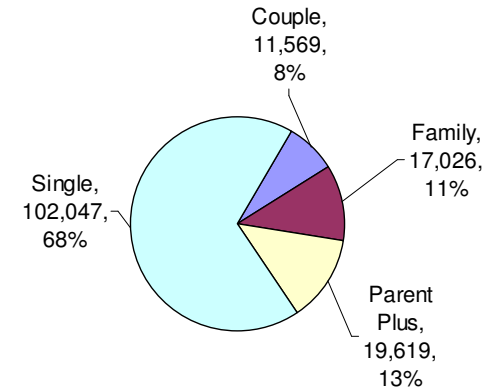
Planholder Enrollment by Group for February 2007



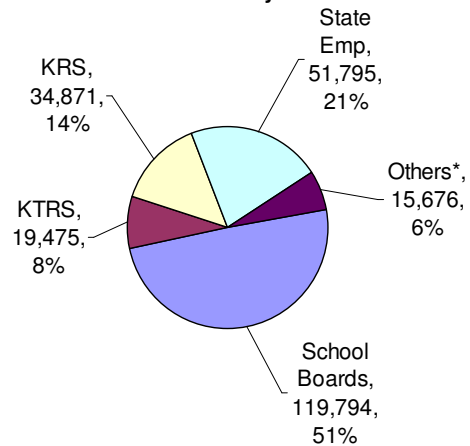
Planholder Enrollment by Plan for February 2007



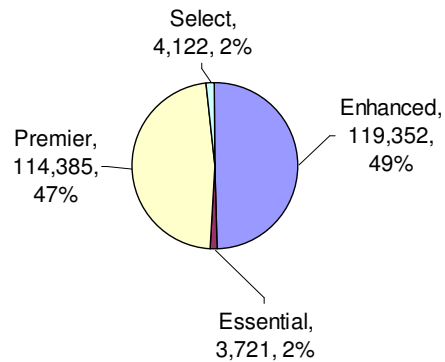
Planholder Enrollment by Coverage Level for February 2007



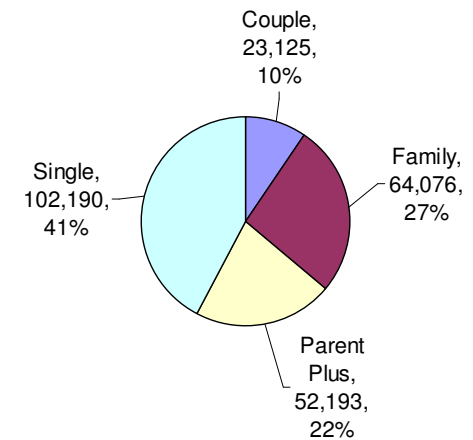
Member Enrollment by Group for February 2007



Member Enrollment by Plan for February 2007



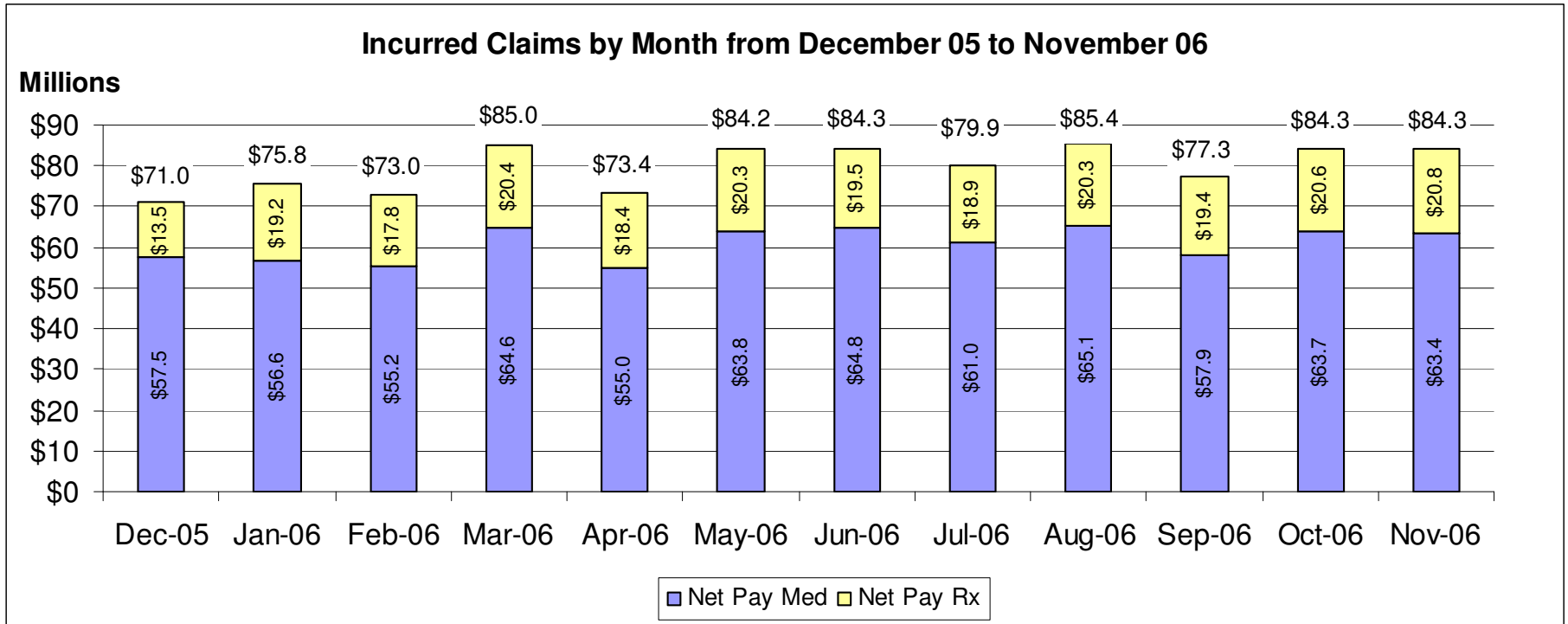
Member Enrollment by Coverage Level for February 2007



* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs

Claims costs, including Medical and Prescription (Rx) for the most recent rolling year. Based on Incurred Claims.



NOTE: Includes run out data from all Carriers

The following represents incurred medical claims only (does not include Rx) by Group for 2004, 2005, and monthly year-to-date for 2006.

	School Boards	KTRS	KRS	State Employees	Others*	Totals
2004	\$246,734,786	\$70,871,782	\$106,215,251	\$123,508,962	\$43,074,069	\$590,404,850
2005	\$258,968,850	\$80,519,150	\$122,173,852	\$127,187,327	\$43,294,828	\$632,144,008
Jan-06	\$22,151,755	\$7,189,003	\$11,597,082	\$12,270,210	\$3,366,966	\$56,575,017
Feb-06	\$22,216,571	\$6,964,571	\$11,103,909	\$11,070,136	\$3,832,016	\$55,187,204
Mar-06	\$25,547,996	\$8,056,062	\$12,382,129	\$14,583,219	\$4,042,181	\$64,611,587
Apr-06	\$21,943,871	\$7,217,407	\$10,236,144	\$12,064,298	\$3,545,115	\$55,006,834
May-06	\$25,400,940	\$8,288,186	\$13,046,857	\$13,140,013	\$3,950,658	\$63,826,654
Jun-06	\$29,847,014	\$7,428,797	\$11,686,827	\$11,938,793	\$3,902,008	\$64,803,439
Jul-06	\$27,059,047	\$7,422,491	\$10,726,224	\$12,042,479	\$3,727,083	\$60,977,325
Aug-06	\$25,039,382	\$8,800,049	\$13,682,483	\$12,937,005	\$4,671,098	\$65,130,017
Sep-06	\$23,025,156	\$7,736,710	\$11,782,588	\$11,797,615	\$3,552,072	\$57,894,141
Oct-06	\$25,594,781	\$7,946,610	\$13,370,031	\$12,494,300	\$4,328,586	\$63,734,308
Nov-06	\$26,939,345	\$8,460,542	\$12,352,168	\$11,813,553	\$3,884,318	\$63,449,926

* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

The following represents incurred Rx claims only (does not include medical) by Group for 2004, 2005, and monthly year-to-date for 2006.

	School Boards	KTRS	KRS	State Employees	Others*	Total RX
2004	\$65,554,794	\$24,644,841	\$34,889,675	\$32,606,398	\$10,801,244	\$168,496,952
2005	\$69,962,581	\$27,103,055	\$39,829,872	\$34,366,451	\$11,563,371	\$182,825,330
Jan-06	\$7,464,782	\$2,901,069	\$4,270,027	\$3,550,677	\$1,054,366	\$19,240,919
Feb-06	\$7,092,454	\$2,495,212	\$3,895,479	\$3,313,382	\$981,386	\$17,777,912
Mar-06	\$8,160,078	\$2,974,993	\$4,376,765	\$3,762,006	\$1,110,341	\$20,384,183
Apr-06	\$7,228,425	\$2,690,840	\$4,093,432	\$3,387,860	\$1,034,118	\$18,434,676
May-06	\$7,961,552	\$2,993,149	\$4,487,496	\$3,704,673	\$1,177,950	\$20,324,819
Jun-06	\$7,662,904	\$2,888,806	\$4,326,965	\$3,536,815	\$1,073,044	\$19,488,535
Jul-06	\$7,221,819	\$2,817,463	\$4,417,221	\$3,413,677	\$1,062,729	\$18,932,910
Aug-06	\$7,748,731	\$3,089,425	\$4,656,198	\$3,667,507	\$1,131,643	\$20,293,505
Sep-06	\$7,444,577	\$2,968,029	\$4,452,349	\$3,423,601	\$1,152,044	\$19,440,600
Oct-06	\$7,984,783	\$3,099,386	\$4,699,119	\$3,660,226	\$1,168,695	\$20,612,209
Nov-06	\$8,288,432	\$3,000,907	\$4,671,941	\$3,679,718	\$1,179,553	\$20,820,551

* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

The following represents incurred medical claims only (does not include Rx) by Plan for 2004, 2005, and monthly year-to-date for 2006.

Time Period	Commonwealth Enhanced	Commonwealth Essential	Commonwealth Premier	HMO*	POS*	PPO*	EPO Option C	Missing*	Total
2004	\$618,383	\$103,010	\$991,694	\$213,264,442	\$41,124,739	\$325,501,729	\$5,548,882	\$3,251,972	\$590,404,850
2005	\$224,286,191	\$5,666,043	\$399,116,529	\$12,938	\$3,035	\$183,434	\$70	\$2,875,769	\$632,144,008
Jan-06	\$20,471,048	\$389,375	\$35,603,672	\$0	\$0	\$0	\$0	\$110,923	\$56,575,017
Feb-06	\$20,488,266	\$589,027	\$33,821,287	\$0	\$0	\$0	\$0	\$288,623	\$55,187,204
Mar-06	\$24,248,813	\$353,943	\$39,561,718	\$0	\$0	\$0	\$0	\$447,113	\$64,611,587
Apr-06	\$21,020,156	\$331,266	\$33,200,318	\$0	\$0	\$0	\$0	\$455,095	\$55,006,834
May-06	\$24,326,550	\$433,395	\$38,742,490	\$0	\$0	\$0	\$0	\$324,219	\$63,826,654
Jun-06	\$25,148,868	\$335,477	\$38,921,273	\$0	\$0	\$0	\$0	\$397,820	\$64,803,439
Jul-06	\$24,048,209	\$407,528	\$36,192,946	\$0	\$0	\$0	\$0	\$328,642	\$60,977,325
Aug-06	\$25,105,079	\$561,148	\$38,889,739	\$0	\$0	\$0	\$0	\$574,051	\$65,130,017
Sep-06	\$22,551,600	\$329,882	\$34,685,941	\$0	\$0	\$0	\$0	\$326,718	\$57,894,141
Oct-06	\$24,932,920	\$467,009	\$37,891,907	\$0	\$0	\$0	\$0	\$442,472	\$63,734,308
Nov-06	\$24,351,116	\$394,980	\$38,453,674	\$0	\$0	\$0	\$0	\$250,156	\$63,449,926

*HMO = HMO Option A plus HMO Option B POS = POS Option A plus POS Option B PPO= PPO Option A plus PPO Option B

*Missing means the claims could not be tagged to a specific plan.

The following represents incurred Rx claims only (does not include medical) by plan for 2004, 2005, and monthly year-to-date for 2006.

Time Period	Commonwealth Enhanced	Commonwealth Essential	Commonwealth Premier	HMO*	POS*	PPO*	EPO Option C	Missing*	Total
2004	\$45,196	\$2,359	\$74,909	\$59,139,093	\$13,498,633	\$94,806,542	\$684,426	\$245,795	\$168,496,952
2005	\$64,879,223	\$1,341,401	\$116,062,858	\$13,027	\$3,674	\$25,483	\$496	\$499,168	\$182,825,330
Jan-06	\$6,874,422	\$107,217	\$12,215,387	\$0	\$0	\$0	\$0	\$43,893	\$19,240,919
Feb-06	\$6,458,805	\$96,238	\$11,135,124	\$0	\$0	\$0	\$0	\$87,745	\$17,777,912
Mar-06	\$7,465,067	\$97,425	\$12,734,545	\$0	\$0	\$0	\$0	\$87,145	\$20,384,183
Apr-06	\$6,590,783	\$92,069	\$11,666,102	\$0	\$0	\$0	\$0	\$85,723	\$18,434,676
May-06	\$7,366,664	\$102,998	\$12,770,926	\$0	\$0	\$0	\$0	\$84,231	\$20,324,819
Jun-06	\$7,003,955	\$89,151	\$12,325,143	\$0	\$0	\$0	\$0	\$70,285	\$19,488,535
Jul-06	\$6,801,515	\$83,371	\$11,974,549	\$0	\$0	\$0	\$0	\$73,475	\$18,932,910
Aug-06	\$7,361,988	\$95,646	\$12,764,412	\$0	\$0	\$0	\$0	\$71,459	\$20,293,505
Sep-06	\$7,084,806	\$92,033	\$12,190,077	\$0	\$0	\$0	\$0	\$73,684	\$19,440,600
Oct-06	\$7,566,295	\$91,934	\$12,893,015	\$0	\$0	\$0	\$0	\$60,966	\$20,612,209
Nov-06	\$7,732,801	\$98,484	\$12,931,505	\$0	\$0	\$0	\$0	\$57,761	\$20,820,551

*HMO = HMO Option A plus HMO Option B POS = POS Option A plus POS Option B PPO= PPO Option A plus PPO Option B

*Missing means the claims could not be tagged to a specific plan.

The following represents incurred medical claims only (does not include Rx) by Carrier for 2004, 2005, and monthly year-to-date for 2006.

Time Period	Anthem	Bluegrass Family Health	CHA Health	Humana	United Healthcare	~Missing*	Total
2004	\$534,701	\$224,164,646	\$139,754,525	\$222,352,699	\$346,307	\$3,251,972	\$590,404,850
2005	\$90,570,181	\$227,291,671	\$118,943,065	\$424,324	\$192,038,997	\$2,875,769	\$632,144,008
Jan-06	\$6,524	\$119,290	\$12,686	\$56,313,664	\$11,932	\$110,923	\$56,575,017
Feb-06	N/A	N/A	N/A	\$54,898,581	N/A	\$288,623	\$55,187,204
Mar-06	N/A	N/A	N/A	\$64,164,474	N/A	\$447,113	\$64,611,587
Apr-06	N/A	N/A	N/A	\$54,551,740	N/A	\$455,095	\$55,006,834
May-06	N/A	N/A	N/A	\$63,502,435	N/A	\$324,219	\$63,826,654
Jun-06	N/A	N/A	N/A	\$64,405,619	N/A	\$397,820	\$64,803,439
Jul-06	N/A	N/A	N/A	\$60,648,683	N/A	\$328,642	\$60,977,325
Aug-06	N/A	N/A	N/A	\$64,556,017	N/A	\$574,000	\$65,130,017
Sep-06	N/A	N/A	N/A	\$57,567,423	N/A	\$326,718	\$57,894,141
Oct-06	N/A	N/A	N/A	\$63,291,836	N/A	\$442,472	\$63,734,308
Nov-06	N/A	N/A	N/A	\$63,199,770	N/A	\$250,156	\$63,449,926

*Missing means the claims could not be tagged to a specific Carrier.

The following represents incurred Rx claims only (does not include medical) by Carrier for 2004, 2005, and monthly year-to-date for 2006.

Time Period	Anthem	Bluegrass Family Health	CHA Health	Humana	United Healthcare	~Missing*	Total
2004	\$17,314	\$61,324,944	\$42,603,314	\$64,273,189	\$32,397	\$245,795	\$168,496,952
2005	\$28,656,463	\$67,495,825	\$33,854,074	\$39,651	\$52,280,149	\$499,168	\$182,825,330
Jan-06	\$9,191	\$31,845	\$17,397	\$19,130,844	\$7,750	\$43,893	\$19,240,919
Feb-06	\$0	\$0	\$0	\$17,690,167	\$0	\$87,745	\$17,777,912
Mar-06	\$0	\$0	\$0	\$20,297,037	\$0	\$87,145	\$20,384,183
Apr-06	\$0	\$0	\$0	\$18,348,953	\$0	\$85,723	\$18,434,676
May-06	\$0	\$0	\$0	\$20,240,588	\$0	\$84,231	\$20,324,819
Jun-06	\$0	\$0	\$0	\$19,418,249	\$0	\$70,285	\$19,488,535
Jul-06	\$0	\$0	\$0	\$18,859,435	\$0	\$73,475	\$18,932,910
Aug-06	\$0	\$0	\$0	\$20,222,046	\$0	\$71,459	\$20,293,505
Sep-06	\$0	\$0	\$0	\$19,366,916	\$0	\$73,684	\$19,440,600
Oct-06	\$0	\$0	\$0	\$20,551,243	\$0	\$60,966	\$20,612,209
Nov-06	\$0	\$0	\$0	\$20,762,790	\$0	\$57,761	\$20,820,551

*Missing means the claims could not be tagged to a specific Carrier.

The following represents incurred medical claims only (does not include Rx) by Coverage Level for 2004, 2005, and monthly year-to-date for 2006.

Time Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2004	\$79,913,106	\$103,803,550	\$85,464,962	\$317,971,261	\$3,251,972	\$590,404,850
2005	\$87,669,983	\$118,702,239	\$88,185,687	\$334,709,939	\$2,876,160	\$632,144,008
Jan-06	\$7,922,011	\$10,158,481	\$8,211,100	\$30,172,502	\$110,923	\$56,575,017
Feb-06	\$8,152,964	\$10,120,083	\$6,835,584	\$29,789,949	\$288,623	\$55,187,204
Mar-06	\$9,228,124	\$12,202,099	\$8,222,701	\$34,511,550	\$447,113	\$64,611,587
Apr-06	\$8,188,361	\$10,450,060	\$6,936,642	\$28,976,676	\$455,095	\$55,006,834
May-06	\$9,776,285	\$11,241,588	\$8,836,914	\$33,647,649	\$324,219	\$63,826,654
Jun-06	\$9,192,407	\$12,440,444	\$7,948,484	\$34,824,284	\$397,820	\$64,803,439
Jul-06	\$8,385,048	\$11,900,657	\$8,389,823	\$31,973,155	\$328,642	\$60,977,325
Aug-06	\$9,197,669	\$11,762,833	\$8,756,191	\$34,839,325	\$574,000	\$65,130,017
Sep-06	\$8,072,655	\$10,190,779	\$7,960,602	\$31,343,388	\$326,718	\$57,894,141
Oct-06	\$8,754,687	\$12,975,748	\$8,410,836	\$33,150,564	\$442,472	\$63,734,308
Nov-06	\$8,813,948	\$12,037,718	\$8,886,995	\$33,461,108	\$250,156	\$63,449,926

* Unable to tag claims to a specific coverage level.

The following represents incurred Rx claims only (does not include Medical) by Coverage Level for 2004, 2005, and monthly year-to-date for 2006.

Time Period	Couple	Family	Parent Plus	Single	Unknown*	Total
2004	\$26,000,775	\$29,722,962	\$19,085,089	\$93,442,331	\$245,795	\$168,496,952
2005	\$28,952,348	\$34,228,770	\$19,155,064	\$99,989,679	\$499,469	\$182,825,330
Jan-06	\$3,209,933	\$3,473,476	\$2,048,446	\$10,465,171	\$43,893	\$19,240,919
Feb-06	\$2,879,466	\$3,253,402	\$1,981,719	\$9,575,580	\$87,745	\$17,777,912
Mar-06	\$3,234,763	\$3,775,739	\$2,256,107	\$11,030,429	\$87,145	\$20,384,183
Apr-06	\$3,024,119	\$3,307,807	\$1,951,256	\$10,065,771	\$85,723	\$18,434,676
May-06	\$3,284,682	\$3,732,544	\$2,112,476	\$11,110,887	\$84,231	\$20,324,819
Jun-06	\$3,171,456	\$3,493,183	\$2,012,338	\$10,741,273	\$70,285	\$19,488,535
Jul-06	\$3,115,687	\$3,432,776	\$1,915,468	\$10,395,504	\$73,475	\$18,932,910
Aug-06	\$3,291,229	\$3,832,752	\$2,133,340	\$10,964,724	\$71,459	\$20,293,505
Sep-06	\$3,116,871	\$3,596,551	\$2,142,310	\$10,511,185	\$73,684	\$19,440,600
Oct-06	\$3,285,374	\$3,886,787	\$2,264,583	\$11,114,499	\$60,966	\$20,612,209
Nov-06	\$3,279,535	\$3,966,590	\$2,500,656	\$11,016,009	\$57,761	\$20,820,551

* Unable to tag claims to a specific coverage level.

Medical Claims Utilization

The following is based on medical claims (does not include Rx) incurred from January 2006 to November 2006. (Note: Services are tracked by each service, not by each visit. Therefore if two laboratory services are performed at one visit, it will count as two services.)

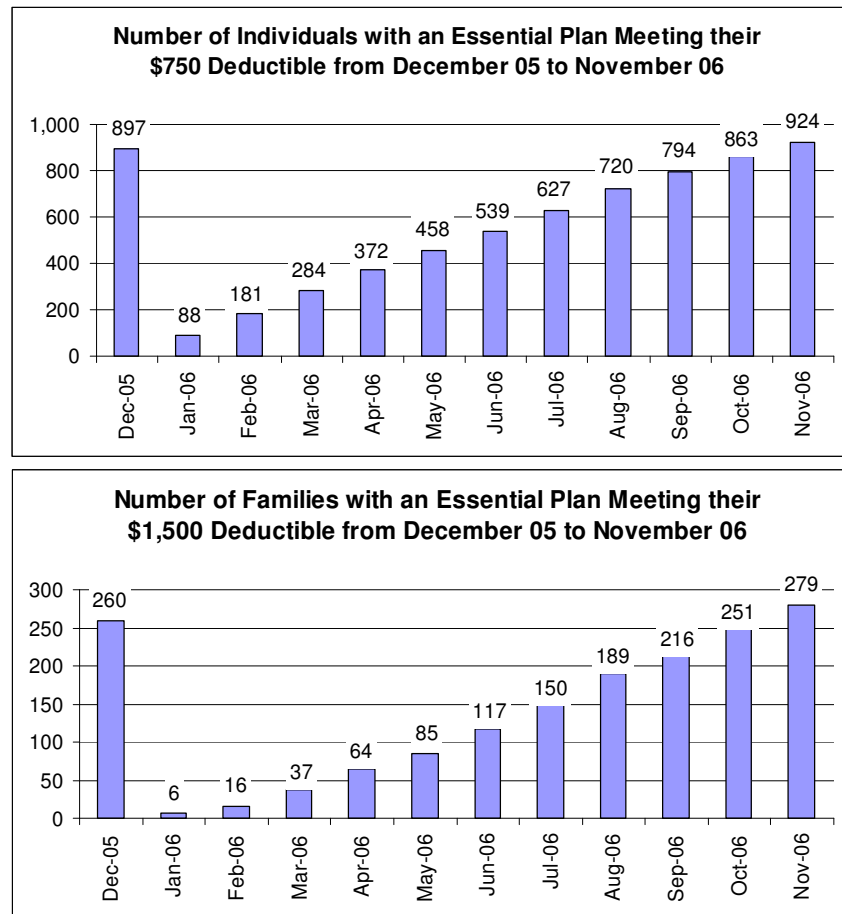
Plans	Number of Hospital Admits per 1000 Members	Average Length of Stay per Admission	Total Admission Days Per 1000 Members	Office Visits per 1000 Members	ER Visits Per 1000 Members	Outpatient Laboratory Services Per 1000 Members	Outpatient Radiology Services Per 1000 Members
Commonwealth Enhanced	69.57	3.8	264.2	7,123.86	201.12	6,584.17	2,413.95
Commonwealth Essential	53.82	3.78	203.39	3,638.06	178.42	3,743.03	1,400.48
Commonwealth Premier	101.25	4.14	419.44	9,435.65	236.5	9,406.62	3,441.05
~Missing		3.43					
All Plans	86.71	3.98	345.46	8,201.81	218.62	7,922.82	2,900.02

*Missing means the claims could not be tagged to a specific plan.

Analysis of Individuals and Families meeting their Deductible

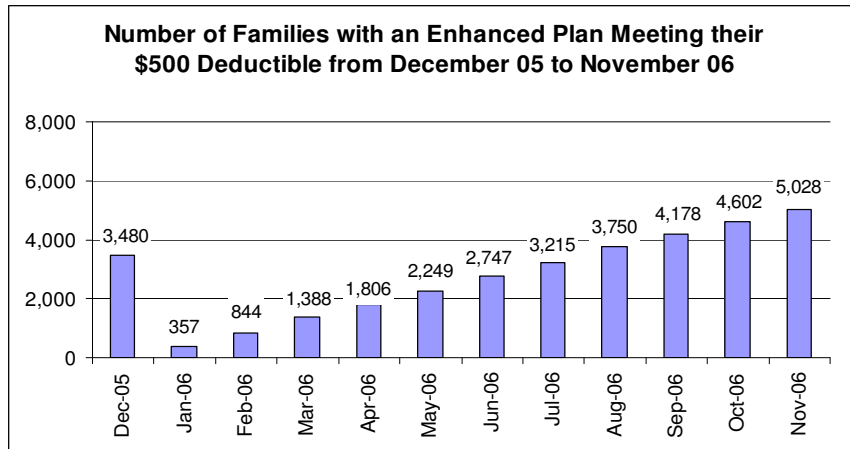
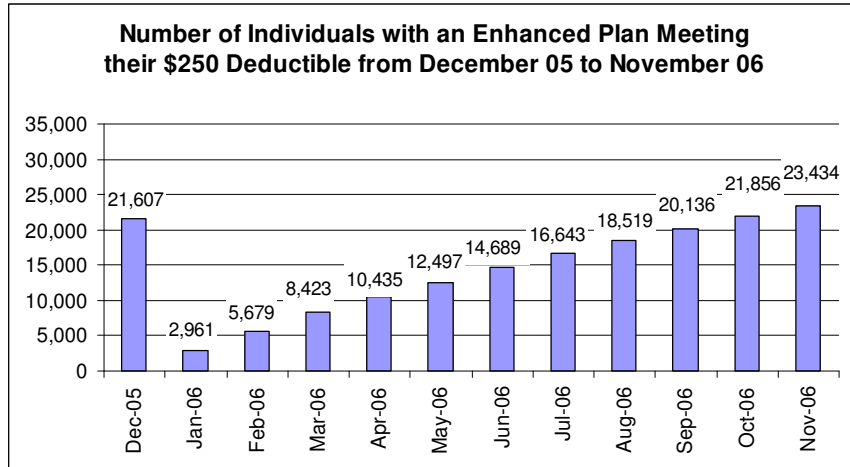
The following details the number of individuals and families by plan, meeting their deductible amounts for the most recent rolling year. The report is based on incurred claims.

Essential

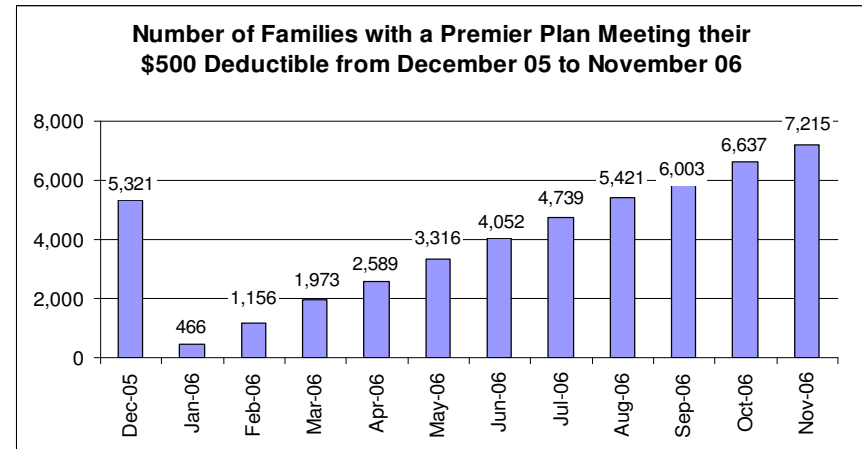
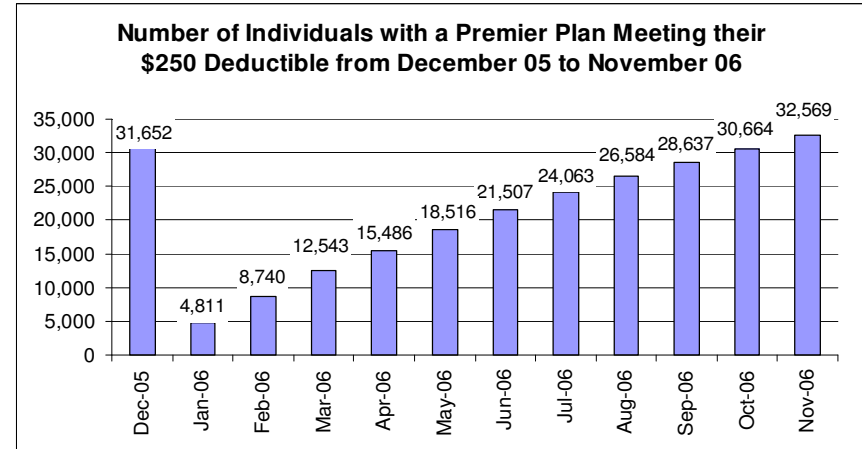


A total of 18.65% of Individuals with an Essential Plan met their deductible while 12.40% of Families met their deductible in 2005.

Enhanced



Premier

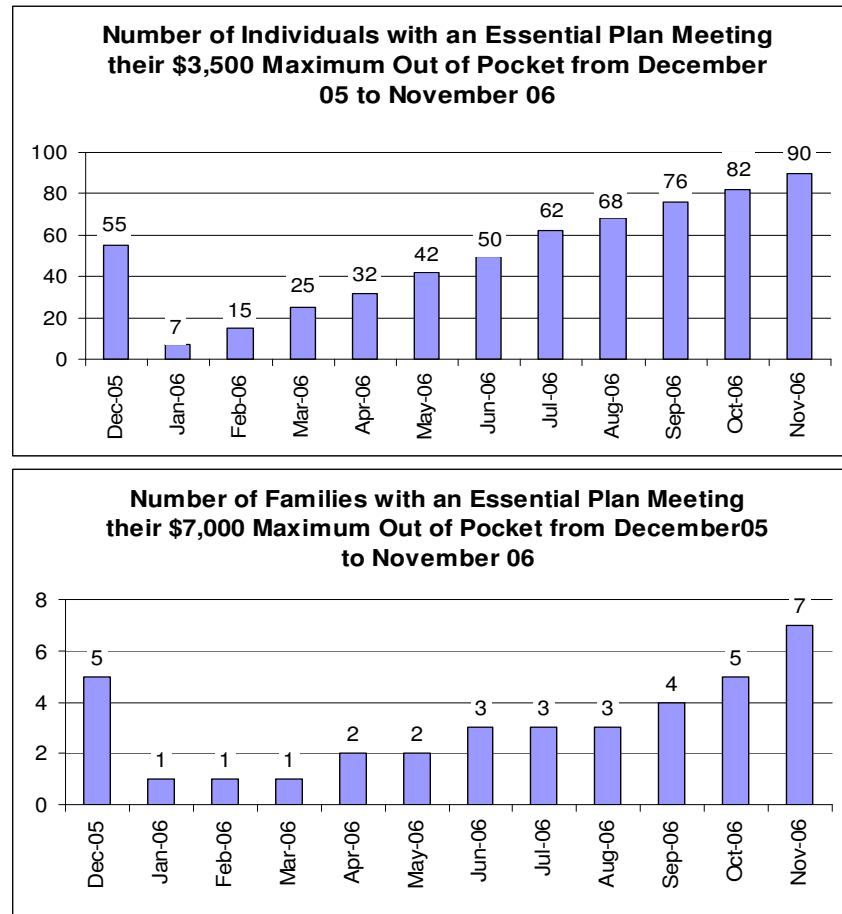


A total of 19.39% of Individuals with an Enhanced Plan met their deductible while 5.00% of Families met their deductible in 2005.
A total of 27.85% of Individuals with a Premier Plan met their deductible while 6.93% of Families met their deductible in 2005.

Analysis of Individuals and Families meeting their Maximum Out of Pocket expenses.

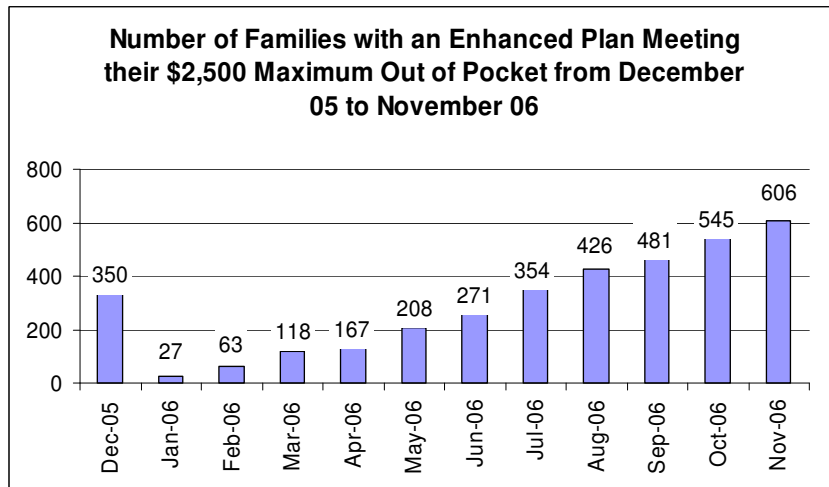
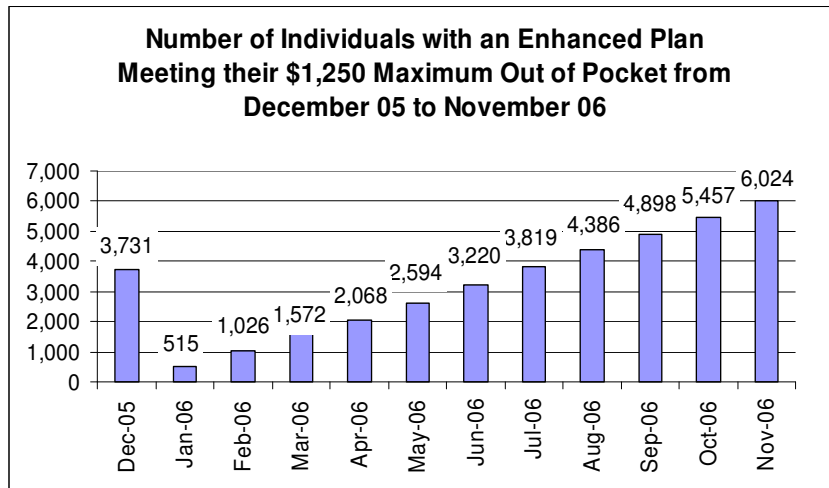
The following details the number of individuals and families by plan, meeting their maximum out of pocket amounts for the most recent rolling year. The report is based on incurred claims.

Essential

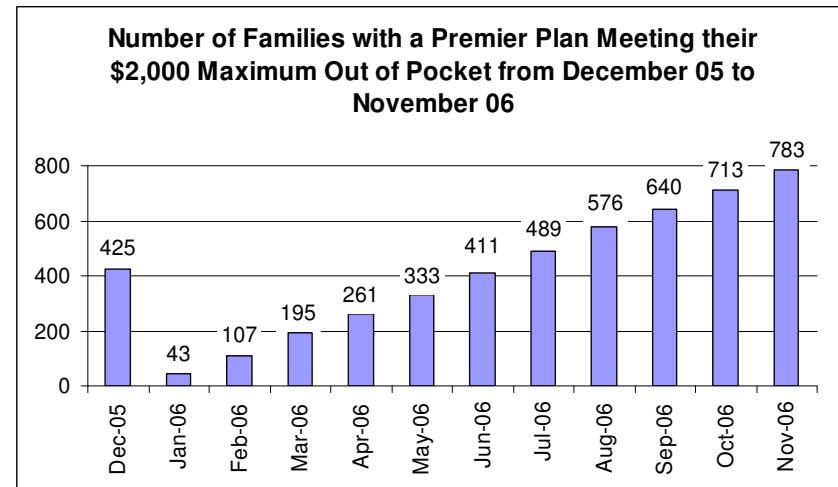
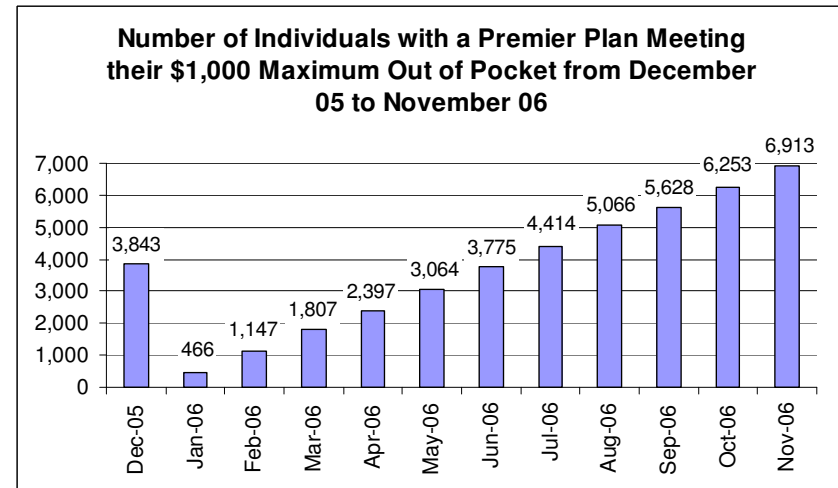


A total of 1.14% of Individuals with an Essential Plan met their Maximum Out of Pocket while 0.24% of Families met their Maximum Out of Pocket in 2005.

Enhanced



Premier



A total of 3.35% of Individuals with an Enhanced Plan met their Maximum Out of Pocket while 0.50% of Families met their Maximum Out of Pocket in 2005.

A total of 3.38% of Individuals with a Premier Plan met their Maximum Out of Pocket while 0.55% of Families met their Maximum Out of Pocket in 2005.

Premium (or Premium Equivalent)

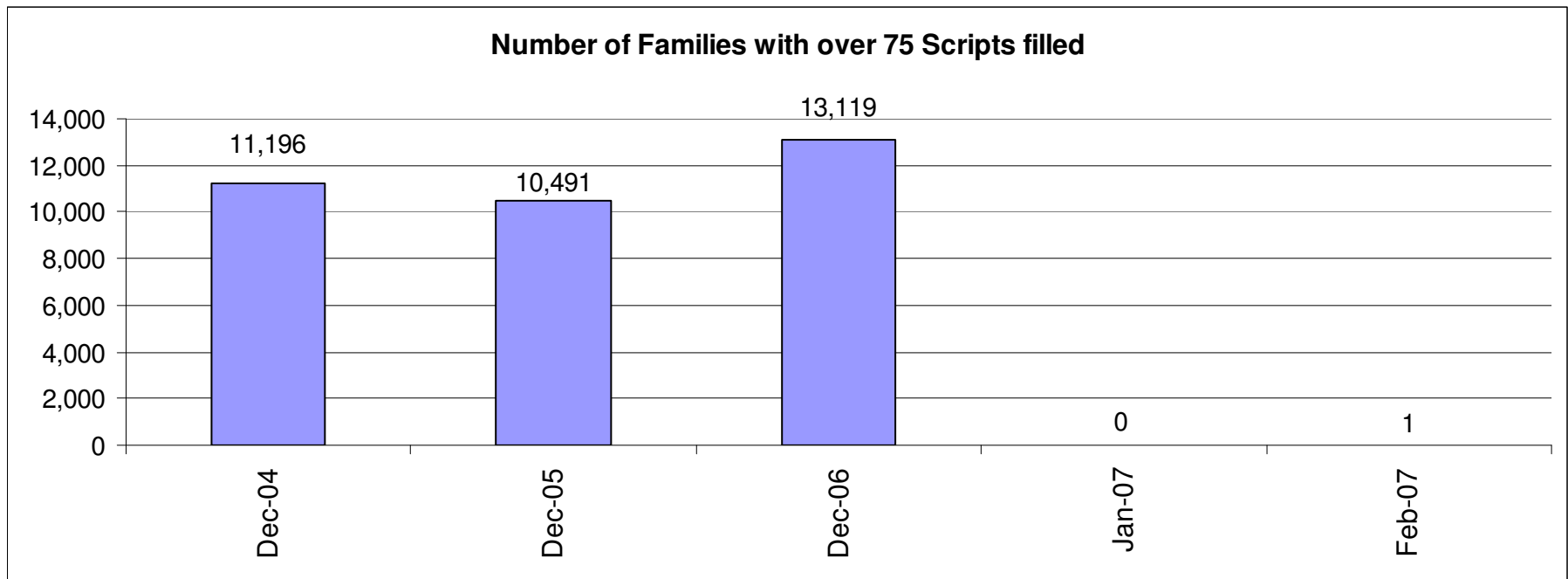
The following details the amount of premium (or premium equivalent) paid by the employee and employer for 2005, 2006, and monthly year-to-date for 2007.

Time Period	Employee Premium Amount	Employer Premium Amount	Total Premium Amount
2005	\$143,746,542	\$808,691,861	\$952,438,403
2006	\$153,948,125	\$949,903,267	\$1,103,851,392
Jan-07	\$14,022,781	\$80,685,817	\$94,708,598
Feb-07	\$14,041,260	\$80,513,073	\$94,554,333

NOTE: Premium (or premium equivalent) is based on enrollment using published premium rates – it is NOT based on actual payments received!

Prescription Drug Utilization

The following details the number of families that have purchased 75 scripts or more during 2004, 2005, 2006 and monthly year-to-date for 2007. After a family has filled 75 prescriptions the co-payment was reduced to \$10 for 2nd tier and \$20 for 3rd tier.



The following details the type of prescription filled, the % that were generic, and the generic efficiency rate for the most recent rolling year. The generic percentage rate and generic efficiency rate increased in 2006. Based on Incurred claims.

	Generic	Brand Name, Generic Available	Brand Name	Other*	Total	Scripts Rx % Generic	Scripts Generic Efficiency Rx
Dec-05	151,254	12,565	120,143	9,700	293,662	51.51%	92.33%
Jan-06	194,259	14,786	156,018	7,383	372,446	52.16%	92.93%
Feb-06	187,019	13,168	148,216	7,333	355,736	52.57%	93.42%
Mar-06	214,735	14,534	168,536	7,961	405,766	52.92%	93.66%
Apr-06	187,892	12,887	147,412	6,740	354,931	52.94%	93.58%
May-06	206,423	13,762	160,018	8,167	388,370	53.15%	93.75%
Jun-06	198,938	13,305	150,823	7,941	371,007	53.62%	93.73%
Jul-06	195,450	12,949	141,714	15,018	365,131	53.53%	93.79%
Aug-06	207,448	13,208	145,656	20,464	386,776	53.64%	94.01%
Sep-06	211,868	12,364	139,282	15,585	379,099	55.89%	94.49%
Oct-06	227,304	13,256	146,137	13,371	400,068	56.82%	94.49%
Nov-06	235,027	13,219	144,198	11,490	403,934	58.18%	94.68%

*Includes: Over the Counter (usually includes items such as diabetic supplies, syringes, and test strips, etc.), Other/Unavailable or Missing (unable to tag to a specific group).

The following details the number of members and patients utilizing prescription benefits and the associated costs for the most recent rolling year. Based on Incurred claims.

	Members	Patients	Scripts	Scripts Per Member	Scripts Per Patient	Allow Amt Per Script*	Net Pay Per Script	Average out of pocket cost per member	Average out of pocket cost per patient
Dec-05	234,180	130,971	293,662	1.25	2.81	\$59.98	\$46.04	\$17.43	\$31.16
Jan-06	234,184	144,199	372,446	1.59	3.03	\$63.45	\$51.66	\$18.75	\$30.45
Feb-06	234,341	144,052	355,736	1.52	2.88	\$61.66	\$49.98	\$17.73	\$28.85
Mar-06	234,253	151,837	405,766	1.73	3.09	\$61.87	\$50.24	\$20.16	\$31.10
Apr-06	234,623	142,179	354,931	1.51	2.92	\$63.68	\$51.94	\$17.77	\$29.32
May-06	234,631	147,116	388,370	1.66	3.07	\$63.96	\$52.33	\$19.24	\$30.69
Jun-06	234,812	145,510	371,007	1.58	3.02	\$63.94	\$52.53	\$18.04	\$29.11
Jul-06	235,076	145,119	365,131	1.55	3.00	\$63.01	\$51.85	\$17.32	\$28.06
Aug-06	233,327	148,032	386,776	1.65	3.07	\$63.35	\$52.47	\$18.04	\$28.43
Sep-06	231,772	145,149	379,099	1.63	3.02	\$61.89	\$51.28	\$17.35	\$27.71
Oct-06	238,592	151,378	400,068	1.67	3.09	\$62.04	\$51.52	\$17.64	\$27.80
Nov-06	239,734	154,114	403,934	1.68	3.07	\$61.84	\$51.54	\$17.34	\$26.98

* "Allow Amt" is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.

The following top 25 drug analysis is based on Rx claims incurred from January 2006 to October 2006.

Product Name*	Total Rx Payments	Net Pay Rx as % of All Drugs	Number of Scripts	Net Pay Per Day Supply Rx	Number of members receiving an RX
NEXIUM	\$6,484,342	3.01%	41,444	\$4.40	7,037
ZOCOR	\$6,234,099	2.89%	44,296	\$3.82	13,025
SINGULAIR	\$4,798,308	2.22%	53,484	\$2.58	11,237
PREVACID	\$4,455,800	2.07%	27,748	\$4.59	4,909
ENBREL	\$4,328,351	2.01%	2,620	\$51.59	385
EFFEXOR-XR	\$3,999,046	1.85%	32,006	\$3.72	5,069
CRESTOR	\$3,311,627	1.53%	40,642	\$2.31	7,661
WELLBUTRIN XL	\$3,298,777	1.53%	23,985	\$4.03	4,292
AVANDIA	\$3,135,683	1.45%	21,749	\$4.14	3,418
VYTORIN	\$3,105,875	1.44%	38,319	\$2.26	6,975
TOPAMAX	\$3,009,612	1.39%	13,510	\$6.78	2,676
SIMVASTATIN	\$2,960,886	1.37%	40,768	\$2.06	12,735
LEXAPRO	\$2,752,703	1.28%	40,406	\$2.05	7,450
PROTONIX	\$2,672,694	1.24%	25,659	\$3.01	4,829
ZOLOFT	\$2,458,011	1.14%	30,587	\$2.38	6,839
ACTOS	\$2,413,689	1.12%	16,518	\$4.18	2,855
FEXOFENADINE HCL	\$2,198,798	1.02%	46,350	\$1.53	13,110
PLAVIX	\$2,143,506	0.99%	16,861	\$3.63	3,432
LOTREL	\$2,010,485	0.93%	24,691	\$2.37	3,423
ZYRTEC	\$1,954,180	0.91%	54,572	\$1.07	16,768
LIPITOR	\$1,921,790	0.89%	24,327	\$2.12	4,356
TRICOR	\$1,912,154	0.89%	21,081	\$2.58	3,601
ADVAIR DISKUS 250/50	\$1,845,698	0.86%	11,050	\$4.87	3,397
LEVAQUIN	\$1,819,162	0.84%	20,285	\$10.03	15,046
CELEBREX	\$1,752,770	0.81%	14,599	\$3.34	3,320

*"Product Name" includes all strengths/formulations of a drug.

In summary the top 25 drugs represent over 17% of the total scripts and over 36% of total Rx expenditures.

Summary	Total Rx Payments	Number of Scripts	Days Supply Rx
Top Drugs	\$76,978,047	727,557	24,643,165
All Product Names	\$215,750,818	4,183,264	118,688,219
Top Drugs as Pct of All Drugs	35.68%	17.39%	20.76%

Utilization

The top 25 clinical conditions based on “incurred claims” from January 2006 to November 2006 are detailed below. (Note: Total Medical Payments represents only the payments made for the specified condition.)

Clinical Conditions	Total Medical Payments	Medical Payments Inpatient	Medical Payments Outpatient	Admissions per 1000 Members	Average Length of Stay per Admission	Office Visits Per 1000 Members	ER Visits Per 1000 Members	Number of Patients	Net Pay Per Patient Medical
“Other” conditions not otherwise categorized*	\$41,223,772	\$6,495,684	\$33,695,896	2.75	7.98	338.51	12.41	67,688	\$609.03
Coronary Artery Disease	\$33,852,784	\$21,819,446	\$12,027,809	5.31	3.21	70.38	2.84	8,117	\$4,170.60
Respiratory Disord, NEC	\$32,077,115	\$8,482,913	\$23,532,776	3.01	2.57	122.62	16.83	27,106	\$1,183.40
Prevent/Admin Hlth Encounters	\$31,983,000	\$234,447	\$31,734,582	0.05	3.2	707.41	0.81	124,056	\$257.81
Gastroint Disord, NEC	\$27,043,552	\$5,251,008	\$21,783,346	2.21	4.3	159.14	15.74	31,842	\$849.30
Spinal/Back Disorders, NEC	\$25,498,265	\$5,750,306	\$19,716,154	1.39	2.66	631.6	5.33	29,805	\$855.50
Arthropathies/Joint Disord NEC	\$22,377,806	\$1,609,504	\$20,700,327	0.58	3.61	696.46	6.63	49,791	\$449.43
Osteoarthritis	\$21,114,274	\$12,664,018	\$8,432,382	3.1	3.41	186	0.37	16,397	\$1,287.69
Pregnancy w Vaginal Delivery	\$13,513,363	\$13,434,448	\$78,915	6.75	2.39	0.56	0.01	2,375	\$5,689.84
Cancer - Breast	\$12,008,968	\$569,614	\$11,437,050	0.41	3.43	49.88	0.08	2,286	\$5,253.27
Infections - ENT Ex Otitis Med	\$11,431,795	\$370,769	\$10,962,683	0.43	2.47	545.17	10.15	75,448	\$151.52
Renal Function Failure	\$11,185,280	\$1,450,996	\$9,596,028	0.32	5.61	11.58	0.34	1,396	\$8,012.38
Cholecystitis/Cholelithiasis	\$10,179,873	\$3,008,142	\$7,171,731	1.53	3.42	7.52	1.42	2,354	\$4,324.50
Condition Rel to Tx - Med/Surg	\$9,961,236	\$7,548,973	\$2,396,774	2.32	5.38	6.44	1.88	2,197	\$4,534.02
Infec/Inflam - Skin/Subcu Tiss	\$8,907,905	\$2,108,862	\$6,756,236	1.34	4.44	256.29	5.19	38,179	\$233.32
Gynecological Disord, NEC	\$8,661,599	\$8,243,218	\$418,380	7.39	3.55	3.46	0.08	2,551	\$3,395.37

Clinical Conditions	Total Medical Payments	Medical Payments Inpatient	Medical Payments Outpatient	Admissions per 1000 Members	Average Length of Stay per Admission	Office Visits Per 1000 Members	ER Visits Per 1000 Members	Number of Patients	Net Pay Per Patient Medical
ENT Disorders, NEC	\$8,510,452	\$1,568,761	\$6,940,842	0.9	2.37	83.62	1.42	18,918	\$449.86
Hypertension, Essential	\$8,325,558	\$1,264,155	\$7,040,495	0.77	3.51	213.23	1.62	41,269	\$201.74
Nutritional Disorders, NEC	\$8,283,335	\$308,515	\$7,962,969	0.13	3.34	658.5	2.73	33,459	\$247.57
Hernia/Reflux Esophagitis	\$8,257,105	\$1,143,361	\$7,100,630	0.55	3.7	324.32	1.46	41,958	\$196.79
Diabetes	\$8,075,586	\$1,869,989	\$6,204,336	0.85	4.11	54.42	1.33	11,175	\$722.65
Newborns, w/w/o Complication	\$7,920,745	\$1,666,382	\$6,207,063	0.79	4.65	202.44	1.36	17,944	\$441.41
Chemotherapy Encounters	\$7,895,808	\$843,589	\$7,052,219	0.38	3.38	1.18		363	\$21,751.54
Urinary Tract Calculus	\$7,695,146	\$1,105,425	\$6,589,606	1.02	2.39	15.75	4.28	2,769	\$2,779.03
Cardiac Arrhythmias	\$7,149,129	\$3,240,794	\$3,879,538	1.15	2.96	40.36	2.04	5,159	\$1,385.76

*Based on ICD-9 codes that could not be attributed to any other condition.

In summary the top 25 clinical conditions represent over 58% of total paid claims for all clinical conditions.

Summary	Total Medical Payments	Medical Payments Inpatient	Medical Payments Outpatient	Admissions Per 1000 Members	Average Length of Stay per Admission	Office Visits Per 1000 Members	ER Visits Per 1000 Members
Top Clinical Conditions	\$393,133,453	\$112,053,319	\$279,418,766	45.44	3.62	5,386.83	96.33
All Clinical Conditions	\$671,196,451	\$199,700,993	\$468,939,104	86.71	3.98	8,201.81	218.62
Top Clinical Conditions as Pct of All Clinical Conditions	58.57%	56.11%	59.59%	52.40%	90.92%	65.68%	44.06%

Claims Lag Analysis

The following claims lag information is based on medical claims (does not include Rx) incurred from January 2006 to October 2006.

Plans	Number of Medical Claims	Avg Days Lag Per Claim	% Claims Paid Within 30 Days	% Claims Paid Within 60 Days	% Claims Paid Within 90 Days
Commonwealth Enhanced	2,606,167	25	80.76%	90.36%	94.39%
Commonwealth Essential	56,882	31.6	75.36%	86.09%	91.45%
Commonwealth Premier	3,652,307	24.8	80.92%	90.62%	94.57%
~Missing*	23,972	216.7	60.91%	78.80%	87.40%
All Plans	6,339,328	25	80.73%	90.43%	94.44%

*Missing means the claims could not be tagged to a specific plan.

The following claims lag information is based on all claims (Medical and Rx) incurred and paid during the most recent rolling year.

Paid	Mar-06	Apr-06	May-06	Jun-06	Jul-06	Aug-06
Incurred						
Mar-06	\$42,751,720	\$28,170,351	\$6,467,371	\$3,433,255	\$1,926,786	\$819,310
Apr-06	N/A	\$34,493,824	\$28,818,772	\$4,394,032	\$2,645,560	\$940,951
May-06	N/A	N/A	\$41,366,106	\$29,072,632	\$7,069,557	\$3,771,359
Jun-06	N/A	N/A	N/A	\$43,026,694	\$30,749,516	\$5,714,004
Jul-06	N/A	N/A	N/A	N/A	\$38,381,466	\$32,900,170
Aug-06	N/A	N/A	N/A	N/A	N/A	\$45,213,813
Sep-06	N/A	N/A	N/A	N/A	N/A	N/A
Oct-06	N/A	N/A	N/A	N/A	N/A	N/A
Nov-06	N/A	N/A	N/A	N/A	N/A	N/A
Dec-06	N/A	N/A	N/A	N/A	N/A	N/A
Jan-07	N/A	N/A	N/A	N/A	N/A	N/A
Feb-07	N/A	N/A	N/A	N/A	N/A	N/A

Paid	Sep-06	Oct-06	Nov-06	Dec-06	Jan-06	Feb-07
Incurred						
Mar-06	\$763,813	\$235,727	\$332,886	\$123,455	\$177,024	-\$205,927
Apr-06	\$1,049,988	\$279,149	\$389,339	\$68,811	\$223,758	\$137,327
May-06	\$1,565,134	\$293,135	\$532,411	\$209,542	\$112,881	\$158,717
Jun-06	\$2,098,163	\$1,117,327	\$586,940	\$544,921	\$373,832	\$80,576
Jul-06	\$4,940,269	\$1,944,501	\$852,145	\$522,618	\$264,809	\$104,257
Aug-06	\$30,583,989	\$5,336,499	\$2,241,538	\$1,071,890	\$796,623	\$179,170
Sep-06	\$40,454,408	\$28,271,700	\$4,948,949	\$2,146,331	\$832,198	\$681,156
Oct-06	N/A	\$46,580,222	\$27,686,628	\$6,768,712	\$2,272,198	\$1,038,756
Nov-06	N/A	N/A	\$43,819,955	\$32,788,971	\$5,738,706	\$1,922,846
Dec-06	N/A	N/A	N/A	\$44,152,401	\$31,923,797	\$5,894,355
Jan-07	N/A	N/A	N/A	N/A	\$46,939,731	\$29,848,145
Feb-07	N/A	N/A	N/A	N/A	N/A	\$41,122,455

Claims Distribution based on Age/Gender

The following is based on claims incurred from January 2006 to November 2006.

	Female			Male		
Age Group Medstat	Members Avg	Net Pay Med and Rx	Net Pay Per Member	Members Avg	Net Pay Med and Rx	Net Pay Per Member
Ages < 1	416	\$4,055,158	\$9,757.36	444	\$5,478,451	\$12,341.63
Ages 1-4	4,239	\$6,987,832	\$1,648.50	4,375	\$12,275,194	\$2,805.95
Ages 5-9	5,721	\$5,256,104	\$918.71	6,037	\$7,458,539	\$1,235.57
Ages 10-14	6,498	\$8,003,264	\$1,231.61	6,843	\$7,892,245	\$1,153.36
Ages 15-17	4,548	\$6,656,931	\$1,463.71	4,730	\$7,805,274	\$1,650.13
Ages 18-19	3,143	\$5,332,362	\$1,696.37	3,362	\$4,299,954	\$1,278.83
Ages 20-24	7,147	\$13,339,221	\$1,866.49	6,313	\$8,329,020	\$1,319.41
Ages 25-29	7,932	\$23,715,938	\$2,989.76	3,869	\$5,500,273	\$1,421.48
Ages 30-34	8,732	\$28,475,812	\$3,261.24	4,723	\$8,769,393	\$1,856.94
Ages 35-39	10,586	\$34,587,648	\$3,267.18	5,524	\$11,956,892	\$2,164.50
Ages 40-44	11,721	\$44,974,254	\$3,837.20	6,299	\$18,278,685	\$2,902.07
Ages 45-49	14,580	\$62,313,443	\$4,274.05	7,789	\$28,630,245	\$3,675.54
Ages 50-54	17,721	\$86,137,231	\$4,860.69	10,368	\$46,890,809	\$4,522.47
Ages 55-59	19,549	\$107,635,512	\$5,505.93	12,592	\$70,393,139	\$5,590.26
Ages 60-64	14,618	\$97,170,631	\$6,647.28	9,783	\$68,408,451	\$6,992.87
Ages 65-74	2,945	\$21,495,396	\$7,298.45	2,166	\$18,443,968	\$8,514.43

Allowed Amount Distribution

The following shows the distribution of members with allowed amount of charges within specified ranges from January 2005 to November 2006. The distribution is based on incurred claims.

Allowed Amount	2005	YTD - 2006
less than 0.00	90	1
\$0.00 - \$499.99	50,002	56,500
\$500.00 - \$999.99	29,231	33,408
\$1,000.00 - \$1,999.99	35,408	40,431
\$2,000.00 - \$4,999.99	47,471	52,764
\$5,000.00 - \$9,999.99	26,210	27,840
\$10,000.00 - \$14,999.99	9,138	9,426
\$15,000.00 - \$19,999.99	4,055	4,178
\$20,000.00 - \$29,999.99	3,539	3,709
\$30,000.00 - \$49,999.99	2,312	2,458
\$50,000.00 - \$74,999.99	932	911
\$75,000.00 - \$99,999.99	390	425
\$100,000.00 - \$149,999.99	299	296
\$150,000.00 - \$199,999.99	116	94
\$200,000.00 - \$249,999.99	57	56
over \$249,999.99	74	79
Total	209,324	232,576

Summary of Enrollment and Claims

The following provides a summary of members, incurred medical claims, and incurred Rx claims for the most recent rolling year.

Time Period	Members	Net Pay Med and Rx	Net Pay Med	Net Pay Rx	Claims Paid	Claims Paid Med	Scripts Rx
Dec-05	234,180	\$70,983,786	\$57,462,393	\$13,521,393	565,959	256,465	293,662
Jan-06	234,184	\$75,815,937	\$56,575,017	\$19,240,919	637,145	258,683	372,446
Feb-06	234,341	\$72,965,116	\$55,187,204	\$17,777,912	612,363	251,027	355,736
Mar-06	234,253	\$84,995,770	\$64,611,587	\$20,384,183	702,079	289,889	405,766
Apr-06	234,623	\$73,441,510	\$55,006,834	\$18,434,676	604,217	243,238	354,931
May-06	234,631	\$84,151,473	\$63,826,654	\$20,324,819	663,389	268,267	388,370
Jun-06	234,812	\$84,291,973	\$64,803,439	\$19,488,535	651,598	273,978	371,007
Jul-06	235,076	\$79,910,234	\$60,977,325	\$18,932,910	633,595	261,236	365,131
Aug-06	233,327	\$85,423,522	\$65,130,017	\$20,293,505	672,159	275,881	386,776
Sep-06	231,772	\$77,334,741	\$57,894,141	\$19,440,600	632,839	246,262	379,099
Oct-06	238,592	\$84,346,517	\$63,734,308	\$20,612,209	688,634	281,617	400,068
Nov-06	239,734	\$84,270,477	\$63,449,926	\$20,820,551	692,356	281,417	403,934

NOTE: Includes run out data from all Carriers

The following illustrates the change in incurred claims amounts (includes medical and Rx) by rolling year.

Incurred Rolling Years	Members	Total Medical and Rx Claims	Total Medical Claims	Total RX Claims
Dec 2004 - Nov 2005	229,482	\$813,576,480	\$629,524,339	\$184,852,817
Dec 2005 - Nov 2006	235,220	\$957,907,626	\$728,658,845	\$229,272,780
% Change (Roll Yrs)	2.50%	17.70%	15.70%	24.00%